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CONFIRMATION NO. 6941

<b>SERIAL NUMBER</b> 10/660,384	<b>FILING OR 371(c) DATE</b> 09/11/2003 <b>RULE</b>	<b>CLASS</b> 800	<b>GROUP ART UNIT</b> 1632	<b>ATTORNEY DOCKET NO.</b> GTC-32D
<b>APPLICANTS</b> Yann Echelard, Jamaica Plains, MA; Esmail Behboodi, Shrewsbury, MA; David Melican, Fiskdale, MA; Carol Ziomek, Milford, MA; William Gavin, Dudley, MA;				
<b>** CONTINUING DATA *****</b> This application is a DIV of 09/298,508 04/22/1999/ABN which claims benefit of 60/106,728 11/02/1998				
<b>** FOREIGN APPLICATIONS *****</b> <i>Won</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 01/31/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance		<b>STATE OR COUNTRY</b> MA	<b>SHEETS DRAWING</b> 0	<b>TOTAL CLAIMS</b> 39
Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials		<b>INDEPENDENT CLAIMS</b> 2		
<b>ADDRESS</b> 31904				
<b>TITLE</b> Somatic cell line				
<b>FILING FEE RECEIVED</b> 546	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	